



Present: Sandra Colley, Pearl Brewer, Sue Davis, Emily Elliott, Vivian Gallegos, Paula Hendricks (phone), Kay King, Liza Marron, Julie Marshall, Nancy Molina, Priscilla Ortega, Pat Perry (phone), Sandra Santa Cruz, Claire Stuebe, Della Vieira, Clarissa Woodworth

Introductions

Evaluation Coordinators for CPP

- Claire – PRC/PPP Evaluation Coordinator
 - Presently doing research on Alamosa indicators for underage drinking.
- Pearl – evaluation liaison for Saguache county CPP
 - Using ASPIRE and looking for other information
- Sandra C. – evaluation coordinator for Costilla county
 - Working with ASPIRE and getting ready to conduct community assessments.
- New coordinator Becky Hand – Rio Grande County
 - They weren't quite ready to join our committee since she was so recently hired.
- CPP requires county specific data entry. The hope was to collect similar data across counties (Julie). Data entry is similar (Sandra C.).
- MAPP
 - Kay – how does MAPP (Mobilizing for Action through Planning and Partnership) fit into this? (MAPP is a planning through partnerships tool. It's four assessments are Community Themes and Strengths Assessment, Forces of Change Assessment, Local Public Health System Assessment; and Community Health Status Assessment.)
 - A local health systems assessment was done a few years ago and it is on record for use.
 - Steps need to be community driven
 - Public health had to do MAPP. They had a desire to be more proactive, rather than just responding when grants need information.
 - Julie attended the APHA conference in Boston and picked up some information.
 - Kay has presented MAPP to several groups in the Valley.
 - Vivian - At the onset of CPP, MAPP training was a requirement, but then the focus kind of changed. She has to keep remembering that MAPP is the process, and if we follow the process, we are doing what MAPP wants.
 - Julie talked with Jenn Leiferman to [redacted]. The National Association of City and County Health Officials developed this and it should be ongoing.
 - Is each county in a similar place? (Nancy)
 - Kay – She will find this out at a meeting tomorrow.
- Liza – Saguache and Costilla (with CPP process) - MAPP and CPP were not introduced together and the committees don't want to do the envisioning process, etc. again. The challenge is to meld the processes together at some point that makes sense.
 - Kay – There is no need to redo the process; it can be inclusive.
 - Vivian – This happened with them as well.
- Clarissa – hopefully, the more data we get, the more our goals/structure will change, so it is good to remember that this is an ongoing process that is constantly changing and being updated.
- Liza – MAPP seems more public health related while CPP has more of a focus on underage drinking. The MAPP process is visioning, planning, gathering data (and people just want to go to the data collection).

HEALTH TRENDS AND DATA COMMITTEE MINUTES December 12, 2006 RMPRC Conference Room

- Kay – There is no need to start over as long as the process that was completed has been inclusive.
 - Clarissa – She is not sure if all counties have been inclusive, so this might need to be something that changes.
- Kay hopes after tomorrow's meeting that there will be more information.
- Julie – Kay may want to talk at the CPP management meeting.
 - **Kay – Our office has a representative who attends the meetings, but Kay may check into personally attending these meetings.**
- Clarissa – CPP is using the strategic planning model, and this is the exact same model as MAPP; what is different is the problem that you are trying to solve. To her, combining the two is easy but what is hard is who is funding the plan.
- Liza – CPP process is pulling from the National Outcome type data. When CPP coordinators go to meetings, they don't talk about MAPP.
- Clarissa – It is nice that MAPP is flexible with their deadlines.
 - I think our goal should be to go to meetings and be more inclusive so we have to go to fewer meetings.
- Vivian – by pulling everything together, maybe there would be more hope for sustainability.
- Julie – as part of the PLC, can she take these statements back to the committee?
 - **Yes – Julie will make a suggestion to use both MAPP and the CPP process together.**
- Clarissa – This is a large state change. Once we all start getting on the same page, this will get easier; If people like Jose could come and talk with the communities, there could be more understanding and acceptance

Review and Update Goals and Strategies worksheet

- Everyone had reviewed the goals on their own?
- Do any changes need to be made? (Sue – We do have a coalition meeting tomorrow, and we would like to take any changes to them.)
- Clarissa – Where would 'analyze and summarize' data go?
 - Della – in #2 (collect new data once gaps were found)
 - **Add a new step under 'strategy'.**
 - **This is a loop. New data is constantly coming in.**
- Sandra – it would really help to define steps now. Strategy and steps are confusing to define and ongoing.
- Clarissa – has steps written out
 - **She will give these to Sandra.**
 - **Have only 1 or 2 goals, and strategies would be part of how goals are accomplished.**
- Liza - somewhere in these steps we need to contact John Stump
 - **Ask John Stump at SLV Development Resource Group to join the HT&D Committee.**
- Sue – Do we want to have just 2-3 people who want to get together to figure out these goals, or do we want to do this as a committee and change our agenda?
 - **A small committee will stay after.**

Review Data Information on Quit Line Demographics and Calls by County

- Paula presented this information.
- What is counted in the numbers?
 - Any time a person personally calls in to quit smoking.
- Three numbers – 1st=October 2006 #s, 2nd=November #s, 3rd=Total # of last (2005) year

- Alamosa – 19, 15, 49
- Conejos – 15, 6, 20
- Costilla – 10, 7, 6
- Mineral – 0, 3, 0
- Rio Grande – 20, 22, 34
- Saguache – 7, 6, 1
- Numbers are up because of media and available ‘quit patches’.
- **If people are interested, Della has specific information for Alamosa County.**
- Julie – Are these calls individuals calling multiple times?
 - Paula – These numbers are individuals who were signed up for help (intakes).
- Pat – Are all calls counted (not just intakes)?
 - Paula – These are probably recorded, but these are not reported to us.
- Liza – What are we going to do with this data to make it valuable and available?
 - Clarissa – Is there a plan to bring this information out?
 - Paula – This would be great to bring to our media committee.
 - **Paula is the media liaison (with Clarissa).**
 - Claire – We could enter this into ASPIRE if we had the total stats for Colorado.
 - **Paula – This is something we could get.**
 - Clarissa – We should regularly get data out there & have end products (i.e. a book or something that shows results or a summary pamphlet).
 - Julie – Does John Stumps’ office have information? Yes.
 - Liza – This makes data friendly and accessible.
 - Liza – If someone calls 211, is the HT&D committee on the list?
 - The actual committee is not, but connections to the committee are.
- Nancy – Does the quit line break statistics down by age? (Yes)
 - Nancy would like to see some type of presentation in schools or by kids in school to others in school.
- Sue – This is something we need to move towards.

Discussion of Questions from SLV Prevention Coalition on who will review and summarize Healthy Kids School Survey qualitative data

- Clarissa – This was done in four counties.
- Liza – Lucia Hand (we will get our complete data to you by the end of Dec)
- Clarissa – If you’ve ever seen this, it is huge and not at all user friendly.
 - **Will Lucia give us any summary? (OMNI)**
 - We also need to analyze the results as a community.
- **Julie – Clarissa would you clarify results for the group.**
 - CPP counties were required to complete these (and for the most part, all did).
 - Questions were on fruits/vegetable consumption, physical activity, drug/alcohol, suicide, and some sexuality.
- Nancy - How long has this been used?
 - Three or four years
 - **Clarissa can look.**
- OMNI is putting together a report on the Healthy Kids Survey (but they did not give a summary).
 - Paula – My understanding is that each school is given their own results.
 - Liza – Schools must give CPP data, but we can not make results public without the schools’ permission.
 - Clarissa – We need to know what’s going right, as well as what is not so we can work towards improving that.
- Vivian - Assessments have been done, but qualitative data has not been done, so who will be doing this? How will this be presented to the community?
 - Clarissa – There are four sets of data. Do we want to work together to summarize this in the same way?
 - Della – It would be helpful to summarize this similarly across counties so we aren’t talking apples and oranges when we come to our qualitative data.
 - Liza – This is one of our steps on goals/strategies worksheets.

- **Evaluation coordinators are interested in working together when we get the data.**
- **Evaluation coordinators will meet separately then report back to HT&D committee**
- **Evaluation coordinators will get contact info after meeting**
- **January agenda item – Evaluation coordinators will report.**

Alamosa County Survey discussion

- Julie Marshall gave a quick presentation.
- RMPRC did telephone based survey from 2001-2004.
 - **For the Alamosa group, figure out in what form PRC could summarize data for their use.**
- We would like to do this survey Valley-wide in the future (when we have funding).
- Survey focused on health behaviors and outcomes.
- If we can do this survey in the future, Julie feels this group would be in charge of deciding what questions would be asked.
 - **Julie would like to talk after this meeting about what data could be helpful to Alamosa County.**
- School based project
 - Adults’ perceptions or opinions about curriculum topics (whether certain topics should be included in school curriculum)
- **Add Julie on the January agenda to present more information.**

ASPIRE Database

- ASPIRE is the database that OMNI has created where we are collecting county level info and where OMNI has entered “standards”.
- Anyone can get on as a guest to look at data, but counties have specific passwords to enter data.
 - ID: Guest, Password: Guest
 - This is just to view standard info.
 - Custom entered data can not be viewed
 - This is good because custom data cannot be leaked to media, etc.
- Be aware – data is not necessarily updated.
- Also there is a regional data CD. (All the data is from 2001, although it says it is from 2004 and it is also color coded incorrectly.)
- Sandra – What does OMNI have to do to update?
 - OMNI is supposed to enter state/national data, but they don’t always have everything there.
- **Julie – Do the evaluation coordinators have a contact at OMNI to check with if data is taking to long to gather?**
 - **This is an area that would be extremely helpful to coordinate across counties.**
- Liza – ASPIRE is a brand new database, and it is in its ‘baby steps’.
- Sandra C. – She went to county office and looked at cigarette tax revenue and calculated rates herself.
 - The trick now is to coordinate this information across counties or the state.
 - Also with the \$0.64 increase, can we see that purchases went down but revenue amounts increased.
 - Did this increase go directly to state, or to counties?
 - Might be able to find information separated out on state database.
- Claire distributed copies of “Frequently Used Research Terms”.
 - **Claire will send this to Pat and Paula.**

Next Meeting

- Tuesday, January 16th at 8:30
- Probably keep the second Tuesday of the month as our meeting date, but just not in January.
 - **Add to agenda – hook up ASPIRE for demonstration.**

Adjourned 10:25am